

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|---------|
| FEE DETERMINATION | WAG | | 4/6/99 |
| O.I.P.E. CLASSIFIER | | | 4/12/99 |
| FORMALITY REVIEW | | 71090 | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 3/15/99 |
| 2 | ✓ | ✓ | 3/15/99 |
| 3 | ✓ | ✓ | 3/15/99 |
| 4 | ✓ | ✓ | 3/15/99 |
| 5 | ✓ | ✓ | 3/15/99 |
| 6 | ✓ | ✓ | 3/15/99 |
| 7 | ✓ | ✓ | 3/15/99 |
| 8 | ✓ | ✓ | 3/15/99 |
| 9 | ✓ | ✓ | 3/15/99 |
| 10 | ✓ | ✓ | 3/15/99 |
| 11 | ✓ | ✓ | 3/15/99 |
| 12 | ✓ | ✓ | 3/15/99 |
| 13 | ✓ | ✓ | 3/15/99 |
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| Claim | Final | Original | Date |
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